

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF GEORGIA

Akanni Akinola Ayodeji :
Petitioner :
 :
v. : AFFIDAVIT IN SUPPORT OF
 : REQUEST TO PROCEED IN
 : FORMA PAUPERIS
Kilolo Kijakazi,
COMMISSIONER OF SOCIAL SECURITY :
Respondent(s) :

I, Akanni A. Ayodeji, being first duly sworn, depose and say that I am the petitioner in the above-entitled case; that in support of my motion to proceed without being required to prepay fees, costs or give security therefore, I state that because of my poverty that I am unable to pay the costs of said proceeding or to give security therefore; that I believe I am entitled to redress.

I further swear that the responses which I have made to the questions below are true and complete.

1. State your residence.

5586 Glen Haven Drive

College Park, GA 3039

2. State the name and age of each member of your household.

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3. Are you or any adult member of your household (persons 18 years of age or older employed? If so, state the name of each employed person, the name and address of the applicable employer, and the amount of such person's salary or wages per month.

I am the only one in my household. I am not employed.

4. If you or any other adult member of your household is not presently employed, but has been previously employed, identify each such person and state the date of last employment and the amount of salary or wages received per month.

Dyvercity Restaurant and Bar- Akanni Ayodeji employed.

Last day worked December 2019.

Wages: \$2.50/hr 35hrs/wk Monthly income \$350.00 + tips

5. Do you or any other member of your household own a home or other real estate? If so, describe such property, state its approximate value and identify the owner.

No one in my household owns a home.

6. Do your or any other member of your household own an automobile or other vehicle? If so, identify the owner of the vehicle, and the make, model, year and approximate value of such vehicle.

No one in my household owns an automobile.

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7. Do you or any other member of your household own any stock, bonds, notes, or other valuables (excluding ordinary household furnishings and clothing)? If so, describe each such item of property, its approximate value, and identify the owner.

No one owns any stocks, bonds, notes, or other valuables in my household.

8. Do you or any other member of your household have a checking and/or savings account, or other cash on hand? If so, state the total amount and the owner of same.

I don't have any checking or savings account. I only have \$500.00 in cash

9. Do you contribute to the support of any person who is not a member of your immediate household? If so, identify such person, his or her relationship to you, and the amount of support contributed per month.

I do not contribute to the support of any person outside of my immediate household.

10. Aside from income from employment, do you or any other household member have any other income? If so, identify each such person, the source of income, and the monthly amount. (Include governmental sources, such as Social Security or other retirement benefits, disability benefits, veterans' benefits, unemployment benefits, AFDC payments, Workers' Compensation benefits.)

I do not receive any outside employment income from any source

11. During the past 12 months, have you or any other household member received money from any sources not otherwise disclosed by your responses to the foregoing questions: For example, income from self-employment, rent payments, interest dividends, life insurance payments, gifts or inheritances.) If so, state the name of the household member who has such other income, the identity of such income and the amount.

No I have not received any money from sources such as self employment, rent payments, interest dividends, life insurance payments, gifts, or inheritances.

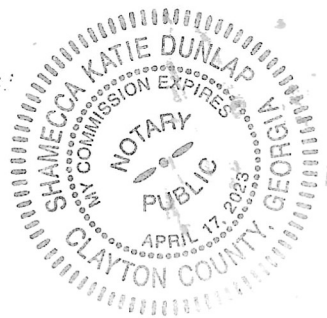
12. List the debts and monthly bills of your household income, including debts owing to banks, loan companies, charge accounts, etc.
- _____
- _____

<u>Credit</u>	<u>Total Debt</u>	<u>Monthly Payment</u>
Midland/Citibank	\$2594.00	Collections
Wellstar Hospital	\$42328.00	Collections
Student Loans/Aid Advantage	\$58,091.00	Begin 06/01/2024 based on income.

13. If you feel that additional information would be helpful to the Court in ruling on your request to proceed in forma pauperis, state that information here.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT.

Executed on this 13th day of January, 2023.



Movants Name:
Akanni A. Ayodeji

/s/ Akanni A. Ayodeji
Signature of Movant

Sworn and subscribed before me
This 13th day of January, 2023.

Shamecca K. Dunlap
Notary Public

My Commission Expires 04/17/2023